

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? 

Yes 

No

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION			
1. Full Name of Committee (as on Statement of Organization)	name		
Carter for Council			
2. Acronym or Abbreviated Name (if any)	3. Committee Tel	ephone Number	
	( )		
Malling Address (address where all campaign finance correspondence is received)     13312 Sedgwick Lane	heck if this is a new	address	
5. City, State, ZIP Code Carmel, IN 46074	6. Party Affiliation Republican	(if applicable)	
CANDIDATE INFORMATION (For Candidate's C	ommittees Only	)	
7. Full Name of Candidate (Include eny nickname)	8. Party Affiliation	or if independent	Candidate
Carter for Council	Republican		
9. Office Sought (Include district number, if any. Not required for exploratory committee.) City Council At-Large	10. County of Rea	sidence	·
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conver	i
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Dutgoing Treasurer (within 10 days amend Statement of	f Organization)	Post-Conve	ention
12. Reporting Period: From: 1/1/13 Through: 12/31/13		DLUMN A is Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		5,788.03	
14. Cash on hand and investments January 1, current year.			5,788.03
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			o de av. de aperalectica sicolo
15a. Itemized (use Schedule A)			
15b. Unitemized			
15c. Add lines 15a and 15b in both columns SUBT		0.00	0.00
	rotal	5,788.03	5,788.03
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)		242.00	0.40.00
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		946.00	946.00
17b. Unitemized		83.33	83.33
	TOTAL	1,029.33	1,029.33
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL.	4,758.70	4,758.70
19. Debts OWED BY the committee (use Schedule D)		12,341.02	are and the second of the second
20. Debts OWED TO the committee (use Schedule E)		<u> </u>	

[IFICATION]	
OF MY KNOWLEDGE AND BELIEF IT IS TRU	JE, CORRECT AND COMPLETE.
THE IV LOLDUYER	Date 4/8/15,
	Date/12/18
or sale or used for any commercial purpose. (If orson who fails to file a complete or accurate and may be subject to civil penalties. (IC 3-9-4-	report as required by the Indiana.

FOR OFFICE USE ONLY

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SOLD APPRILATION &





State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE	NUMBI	ER	
Page	2	of	10	

	·			
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:		A	
	Direct			
	In-Kind (describe)			
1	Other Benefitati			
# # #	Other Receipts:			
	☐ Misc. (specify)			
Contributor's Occupation (if required)				
2.	Contributions:			
	Direct			
	☐ In-Kind (describe)			
	Other Receipts:	1		
	interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
3.	Contributions:			
<b>y</b> .	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)		- Allerton	
Contributor's Occupation (if required)				
4.	Contributions:			
	In-Kind (describe)			
		]		
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:	1		
	☐ Interest ☐ Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE		\$0		
(Enter total on ITE	M 15a of the Summary Sheet)			



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FIL	E NUMBER	
Page3	of10	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
(street, number, city, state, ZIP code) 1.	Contributions: Direct In-Kind (describe)	PERIOD	TEAR-10-DATE	
	Other Receipts:  Interest Loan  Misc. (specify)			
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Recelpts: Interest Loan Misc. (specify)			
QUETOTAL	THIS PAGE OF SCHEDULE A	\$		1
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$0		
(Enter total on ITE	M 15a of the Summary Sheet)	<b>Y Y Y</b>		



# (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER					
Page _	4	_ of	10		

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
2.		Contributions:  Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
3.		Contributions: Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
4.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
5.		Contributions:  Direct In-Kind (describe)			
		Other Receipts:  Interest Loan  Misc. (specify)			
		THIS PAGE OF SCHEDULE A	\$		
	TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY  M 15a of the Summary Sheet)	\$0		



# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
Page	5 of 10	

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
4.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
SUBTOTAL	. THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on IT)	A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$0		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

#### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

**Itemized Contributions and Other Receipts** 

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

		FILE	NL	IMBE	R	
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pay vinitivy.				
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE		\$0		
The second secon				



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

# (CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER				
Page7 of10				

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
CodeCCarmel Symphony 760 3 <sup>rd</sup> Ave SW Carmel, IN	Arts Donation	x Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	682.00		7/11/13
CodeCActors Theater of Indiana 510 3 <sup>rd</sup> Ave SW Carmel, IN	Arts Donation	x Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	264.00		7/11/13
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		,	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	GE OF SCHEDULE B	\$946.00	· · · · · · · · · · · · · · · · · · ·	
TOTAL OF ALL PA	\$946.00				
	1				



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER
Page8 of10

			Page	8 of	10	
	PUBLIC QUESTION	N INFORMATION				
Enter Text of Public Question	A TOTAL PROPERTY OF THE PARTY O					
Type of Question: Statewide	Local					
Position: Supported Oppo						
RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B	DATE OF	
(street, number, city, state, ZIP code)		and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	EXPENDITURE	
Code		☐ Direct ☐ In-Kind				
Code		Payment of Debt		1	i ;	
		Returned Contribution			! !	
		Purpose:				
Code		☐ Direct ☐ fn-Kind				
Code	:	Payment of Debt				
		Returned Contribution				
		Purpose:				
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt				
		Returned Contribution				
		☐ Other				
		Purpose:				
Codo		☐ Direct ☐ In-Kind				
Code		☐ Payment of Debt				
		Returned Contribution				
		Purpose:	•			
Code		☐ Direct ☐ In-Kind				
•		Payment of Debt Returned Contribution			:	
		Other				
		Purpose:				
		☐ Direct ☐ In-Kind				
Code		☐ Payment of Debt				
		Returned Contribution				
		Other Purpose:				
	SUBTOTAL THIS PAGE OF SCHEDULE C \$					
TOTAL OF ALL PAG	GES OF SCHEDULE C ON THE		\$0			
(Enter total on ITEM 17a of the Summary Sheet)						



State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

	FILE	ENUMBE	R	
		•		
Page	1.	of	2	

\*ISTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this setule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the amounts during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

			,	
CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZiP code)	AMOUNT  NATURE OF DEBT	DATE DEBT CUMULATIVE INCURRED PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Carter		411 61	1.120102	
1311 Rich Rd.		41.01	6/28/02	41.01
LENDERS OCCUPATION		Wan		
Ronald Carter	·	10 10		
1311 Ridge Rd.		13.63	7/30/02	54.64
Carnel IN 40033		lean		
Ronald Carter		100 00		
1311 Rioge Rd.		100,00	32103	154.04
Carnel, IN 40033		Wan		
Ronald Carter		77.97		
1311 Rich Rd.		,	3/22/03	232.41
Carnel, 1 H0033		wan		
Ronald Carter	,	1350,58		
1311 Rida Rd.		,	3 24/03	1583.19
COVINULIA 40033		loan		
Konald Carter		118.72		
1311 Ridge Rd.		10175	3 27/03	1701.91
Carmel IN 46033		Wan		
Ronald Carter		FIN IN		THE PERSON NAMED IN COLUMN NAM
1311 Ridge Ad.		569.64	4/6/03	2271.55
Carnel IN 46033		Wan	. 10100	
SUB TOTAL THIS PAGE OF SCHEDULE D				
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY				
(Enter total on ITEM 19 of the Summary Sheet)				



State Form 4606 (R8 / 8-97) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1997

#### (CFA-4 SCHEDULE D) **Debts Owed by This Committee**

	FILE	NUMBE	R	
				·
			-,,	-
Page	2	of	2	

In TRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Carter 1311 Ride Rd. Carnel, IN LENDERS OCCUPATION: 40033	•	191.81 - Loan	u  11 03		2463.34
Ronald Carter 1311 Ridge Ad. Carnel, M. LENDERS OCCUPATION: 46033 Ronald Carter		24.23 Wan	4/13/03		2487.59
RONAL CAPTER		3337. 90 Laan	3/10/95		5825.49
LENDERS OCCUPATION:		t -			•
LENDERS OCCUPATION:					·
LENDERS OCCUPATION:			,		
LENL OCCUPATION:		0112 70711	T.U.O. D.A.O.F. O.F.	SCHEDIN E D	2000 01

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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE D) Debts Owed by This Committee

Page	<u>.</u>	of	1	,	
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	المسترات		ĸ		i o

I UCTIONS: Please type or print legibly IN BLACK INIK all information on this form. For assistance in completing this
screet is see instructions on the municipalities and leads and loans, recordless of the amount, OweD by the
committee during the reporting period. Include all amounts owed for or to length institutions, individuals.
credit numbases committee credit card accounts, etc. List each vendor baid by credit card issued in the
name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes
loans of at least \$1,000 during the celendar year. Otherwise, this is optional.

•					•
CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, cily, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT  NATURE OF DEBT	DATE DEST INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald Carter 1311 Zidk Rd. Councel IN 4003Z		3985,33	4/28/03		9810.82
Ronald Carter	-	loan			
		43.92 Loan	63/03		9854.75
Ronald Carter		3au.87	5 603		10,161.61
ENDERS OCCUPATIONS  ROYALD CArter		Wan 38.19			
ENDERS OCCUPATION:		Wan	4/30/3		10,200.30
Ronald Carter		47.32	5/3/03		10,247.4
ENDERS OCCUPATION:					
ENDERS OCCUPATIONS					-
•			· 		
ENDERS OCCUPATION:	<u>.</u>	SUB TOTAL	L THIS PAGE OF	SCHEDULE D	:4422.13
	TOTAL OF AL	L PAGES OF SCHEDUL	E D ON THE LAS	T PAGE ONLY	Sett in



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTE

(Enter total on ITEM 19 of the Summary Sheet)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions; individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

in a FIL	E NUMBER
Pago	of

		1 ageoi			
CREDITOR'S OR LENDER'S NAME 8. MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDIA BALANCETH PERIOD
Ronald Carter 12715 Stanwich Curnel IN 40033	my Campaign Stove PO BOX 594 Jeffersonville, IN 47	1,749.84	3/1/07		
CHYMLL IN 40033 LENDER'S OCCUPATION:	PO BOX 596 Jeffersonville, IN 47	131 Wan			11996.94
	·		entra de rocado entra de la constanta de la co		
LENGER'S OCCUPATION:					·
LENDER'S OCCUPATION:					
				A THE STATE OF THE	
LENDER'S OCCUPATION.					
LEHOER'S OCCUPATION.					
LEFDER'S OCCUPATION.					
LENDER'S OCCUPATION:					
`		SUBTOTA	AL THIS PAGE (	OF SCHEDULE D	1749.34
	TOTAL OF AL	L PAGES OF SCHEDU	LE D ON THE LA	ST PAGE ONLY	



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit d accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A .der's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	FILE	NUMBE	ĒR	
				·
Page _	1	of	12	

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any)	AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD
Ronald Carter 12715 Stanwich Carnel, IN 46033	OSP Printing 102 W. Carnel O Carnel, IN 40032	r.\$286.20 Wan	42707		12,783.14
Ronald Carter 12715 Stanwich Carmel, 1N 44033	le Peep Carmel, M	32.86 Wan	4/20/07		12,316.02
DER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
		SUBTOTA	AL THIS PAGE	OF SCHEDULE D	319.00
	TOTAL OF AL	L PAGES OF SCHEDU		AST PAGE ONLY	. 10



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

(Enter total on ITEM 19 of the Summary Sheet)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	FILE NUMBER
Рапе	95 of 185
Page	7 of 10 -

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT  NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Ronald E. Carter 12715 Stanwill Pl.		25.00	3 29/11		12,316.0
Carmel, IN 40033		loan			12,5,0.0
ENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
			,		
ENDER'S OCCUPATION:					
ENDER'S OCCUPATION:					
ENDER'S OCCUPATION:			A CONTRACTOR OF THE PROPERTY O		
LENDER'S OCCUPATION:		SUBTOTA	AL THIS PAGE O	OF SCHEDULE D	\$ 75.00